NEVADA REQUEST FOR ADVISORY OPINION

PERSONAL INFORMATION:	
NAME:	TITLE OF PUBLIC OFFICE:
ADDRESS:	
CITY, STATE, ZIP:	
TELEPHONE:	CELL PHONE:
E-MAIL:	
Mark the check box for the type of opinion you are requesting (NRS 281.236.5 or NRS 281A.440.1) below:	
Pursuant to NRS 281.236.5, I request a determination whether relief from the strict application of the provisions of NRS 281.236.3 ("revolving door" prohibition) is proper. A letter detailing all necessary and relevant facts and circumstances is attached. I understand that NRS 281.236 provides no right to confidentiality and that the Commission meeting on which this matter will be decided and the opinion rendered by the Commission will be open to the public. I also understand that pursuant to NRS 281.236.5, the opinion of the Commission in this matter is subject to judicial review.	
Pursuant to NRS 281A.440.1, I hereby request an advisory opinion concerning the propriety of my own past, present or future conduct in my public position identified above. A letter detailing all necessary and relevant facts and circumstances is attached. I understand that pursuant to NRS 281A.440.1, the Commission's opinion in response to this request is: (a) Binding upon me as to my future conduct; and (b) Final and subject to judicial review pursuant to NRS 233B.130. The proceeding regarding this request and the opinion rendered by the Commission are confidential unless I waive confidentiality or it is deemed to have been waived by my conduct.	
Mark the checkboxes below (if appropriate) to indicate acknowledgement and acceptance of each:	
I also understand that pursuant to NRS 281A.460: The Commission's advisory opinion may include guidance to me on questions of whether: (a) A conflict exists between my personal interest and my official duty. (b) My official duties involve the use of discretionary judgment the exercise of which in the particular matter would have a significant effect upon the disposition of the matter. (c) The conflict would materially affect the independence of judgment of a reasonable person in my situation. (d) I possess special knowledge which is an indispensable asset of my public agency and is needed by it to reach a sound decision. (e) It would be appropriate for me to withdraw or abstain from participation, disclose the nature of my conflicting personal interest, or pursue some other designated course of action in the matter.	
I hereby waive confidentiality of this matter pursuant to the provisions of NRS 281A.440.5.	
I voluntarily waive the 45-day requirement for the Commission to hear this request pursuant to the provisions of NRS 281A.440.1. REQUESTED BY:	

Please return an original signed form with letter detailing facts and circumstances to:

Date

Executive Director Nevada Commission on Ethics 3476 Executive Pointe Way, Suite 10 Carson City, Nevada 89706

Signature

Print Name: